HOME SCHOOL NOTIFICATION FLATHEAD COUNTY SUPERINTENDENT OF SCHOOLS

A copy of this completed form will be provided to you if requested.				
I have student(s) attending home school for the school year school district.				I reside in the
Student's Name			Date of Birth	<u>Grade</u>
Name of last scho	ol attended:			
district?ye	sno	·	ral programs available	J
Section 20-5-109, MCA, No shall:	onpublic school requirements fo	r compulsory enrollmer	nt exemption. To qualify its studer	nts a nonpublic or home schoo
(1) maintain records on pu (2) shall provide at least th (3) be housed in a building (4) provide an organized c (5) in the case of home sch of the student's attendance	the minimum aggregate hours of a that complies with applicable lourse of study that includes instools, notify the County Superint	public instruction in according the alth and safety ruction in the subjects rendent of Schools, of the		-302;
Parent or Guardian (print)		Parent or C	Guardian Signature
Address			Phone	
City	State	Zip	Date	

Please return completed form to our office via email, mail or fax: Email address: jeggensperger@flathead.mt.gov